

Data Collection Tool (Indicators 11 and 13)

School:_____ Reviewer:_____ Date of Review:_____

Student ID/SAIS:_____ DOB:_____ Eligibility:_____

Primary home language indicated by the parent _____ Language in which the student is most proficient _____

Evaluation/Reevaluation																								
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II.A.5	_____	For initial evaluation, the student was evaluated within 60 calendar days. Consent Date: _____ Eligibility Determination Date: _____ # of days over: _____ Reason: _____	<table border="0" style="width: 100%;"> <tr> <th style="text-align: left; width: 10%;">Line Item</th> <th style="text-align: left; width: 10%;">I-O-U</th> <th style="text-align: left; width: 80%;">Description</th> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Documentation of annual IEP goal(s) that will reasonably enable the student to meet the postsecondary goal(s).</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Documentation of one or more transition services/activities that support postsecondary goal(s)</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Evidence that a representative of another agency that is likely to provide and/or pay for transition services has been invited to the meeting when parent consent is obtained.</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Documentation that the postsecondary goals were derived from age appropriate assessment(s).</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>The student's course of study supports the identified postsecondary goal(s).</td> </tr> <tr> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Documentation that student was invited to meeting.</td> </tr> </table>	Line Item	I-O-U	Description		<input type="checkbox"/>	Documentation of annual IEP goal(s) that will reasonably enable the student to meet the postsecondary goal(s).		<input type="checkbox"/>	Documentation of one or more transition services/activities that support postsecondary goal(s)		<input type="checkbox"/>	Evidence that a representative of another agency that is likely to provide and/or pay for transition services has been invited to the meeting when parent consent is obtained.		<input type="checkbox"/>	Documentation that the postsecondary goals were derived from age appropriate assessment(s).		<input type="checkbox"/>	The student's course of study supports the identified postsecondary goal(s).		<input type="checkbox"/>	Documentation that student was invited to meeting.
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